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TO:	FAX NUMBER:
Examiner Zachariah Lucas United States Patent Office	(703) 872-9306
FROM:	PHONE NUMBER:
Michael D. Davis	(908) 298-2194
TOTAL NO. OF PAGES INCLUDING COVER	DATE
13	August 23, 2004

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NOTES/COMMENTS:

Re: Application No. 09/993,777  
In Re Application of Martha A. Wild, et al., Filed: 11/06/2001  
Group Art Unit: 1648; Attorney Docket No. SY01106KQ1  
For: Recombinant Infectious Laryngotracheitis Virus and Uses Thereof

Dear Examiner Lucas:

Transmitted herewith are:

- Fax cover sheet (1 pg.)
- Certificate of Fax Transmission (1 pg.)
- Response Transmittal (1 pg.)
- Fee Transmittal (1 pg. in dupl.)
- Request for Reconsideration w/ attachment (8 pgs.)

  
MICHAEL D. DAVIS  
Attorney for Applicant  
Registration No. 39,161

PHONE: (908) 298-2194

FAX: (908) 298-5388

Attorney Docket No.: SY01106KQ1

Application No.: 09/993,777

Filing Date: 11/06/2001

First Named Inventor: Martha A. Wild, et al.

PTO/SB/97 (08-03)

Approved for use through 07/31/2005. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE


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PTO/SB/21 (02-04)

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/993,777	
	Filing Date	11/06/2001	
	First Named Inventor	Martha A. Wild, et al.	
	Art Unit	1648	
	Examiner Name	Z. Lucas	
Total Number of Pages in This Submission	13	Attorney Docket Number	SY01106KQ1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Reconsideration w/ attach. (8 pgs.); Certificate of Transmission (1 pg.); Fax Cover Sheet (1 pg.)
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or individual name	Michael D. Davis, Reg. No. 39,161	
Signature	<i>Michael D. Davis</i>	
Date	August 23, 2004	

CERTIFICATE OF TRANSMISSION/MAILING		
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Signature		Date

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PTO/SB17 (10-03)

Approved for use through 07/31/2008. OMB 0631-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL  
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 200.00)

**Complete if Known**

Application Number	09/993,777
Filing Date	11/06/2001
First Named Inventor	Martha A. Wild, et al.
Examiner Name	Z. Lucas
Art Unit	1648
Attorney Docket No.	SY01106KQ1

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit  
Account  
Number  
Deposit  
Account  
Name

19-0365

Schering-Plough Corporation

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			<b>(\$ 0.00)</b>

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 280	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$ 0.00)

\*\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity - Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65		Surcharge - late filing fee or oath	
1052 50	2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130		Non-English specification	
1812 2,520	1812 2,520		For filing a request for ex parte reexamination	
1804 920*	1804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*		Requesting publication of SIR after Examiner action	
1251 110	2251 55		Extension for reply within first month	
1252 420	2252 210		Extension for reply within second month	
1253 950	2253 475		Extension for reply within third month	
1254 1,480	2254 740		Extension for reply within fourth month	
1255 2,010	2255 1,005		Extension for reply within fifth month	
1401 330	2401 165		Notice of Appeal	
1402 330	2402 165		Filing a brief in support of an appeal	
1403 290	2403 145		Request for oral hearing	
1451 1,510	1451 1,510		Petition to institute a public use proceeding	
1452 110	2452 55		Petition to revive - unavoidable	
1463 1,330	2463 665		Petition to revive - unintentional	
1501 1,330	2501 665		Utility issue fee (or reissue)	
1502 480	2502 240		Design issue fee	
1503 840	2503 320		Plant issue fee	
1480 130	1480 130		Petitions to the Commissioner	
1807 50	1807 50		Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180		Submission of Information Disclosure Stmt	
8021 40	8021 40		Recording each patent assignment per property (times number of properties)	
1809 770	2809 385		Filing a submission after final rejection (37 CFR 1.128(a))	
1810 770	2810 385		For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385		Request for Continued Examination (RCE)	
1802 800	1802 800		Request for expedited examination of a design application	
Other fee (specify) <u>Filing an application for patent term adjustment</u>				200.00

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 200.00)**SUBMITTED BY**

Name (Print/Type)	Michael D. Davis
Signature	<i>Michael D. Davis</i>

Registration No. 39,161  
(Attorney/Agent)**(Complete if applicable)**

Telephone	908-298-2194
Date	08/23/2004

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0851-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 200.00)

## Complete if Known

Application Number 09/993,777  
 Filing Date 11/06/2001  
 First Named Inventor Martha A. Wild, et al.  
 Examiner Name Z. Lucas  
 Art Unit 1648  
 Attorney Docket No. SY01106KQ1

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:

Deposit Account Number 19-0365  
 Deposit Account Name Schering-Plough Corporation

The Director is authorized to: (check all that apply)

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## FEE CALCULATION

## 1. BASIC FILING FEE

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1005 180	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$ 0.00)

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Total Claims  -20\*\* =  X  =   
 Independent Claims  -3\*\* =  X  =   
 Multiple Dependent  =

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
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1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65		Surcharge - late filing fee or oath	
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1452 110	2452 55		Petition to revive - unavoidable	
1453 1,330	2453 665		Petition to revive - unintentional	
1501 1,330	2501 665		Utility issue fee (or reissue)	
1502 480	2502 240		Design issue fee	
1503 640	2503 320		Plant issue fee	
1460 130	2460 130		Petitions to the Commissioner	
1807 50	2807 50		Processing fee under 37 CFR 1.17(q)	
1808 180	2808 180		Submission of Information Disclosure Stmt	
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1802 900	2802 900		Request for expedited examination of a design application	

Other fee (specify) Filing an application for patent term adjustment

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 200.00)

## SUBMITTED BY

Name (Print/Type) Michael D. Davis  
 Signature *Michael D. Davis*

Registration No. (Attorney/Agent)

39,161

(Complete if applicable)

Telephone 908-298-2194

Date 08/23/2004

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